



City of Salisbury
Development Services
132 North Main Street
Salisbury, NC 28144
Ph. 704-638-5208
Em. 1stop@salisburync.gov

SIDEWALK DINING PERMIT AND APPLICATION

SHADED AREA FOR STAFF USE

BUSINESS INFORMATION

Business Name: _____

Business Address: _____ Business Telephone Number: _____

Business Type: ☐ Restaurant ☐ Wine Shop ☐ Café / Cafeteria

BUSINESS OPERATOR INFORMATION

Name(s): _____

Address: _____ Telephone Number: _____

SIDEWALK DINING INFORMATION

Will alcohol be served on the sidewalk? ☐ Yes ☐ No

If YES, ensure signage posted at exit points "NO ALCOHOL BEYOND THIS POINT"

Hours of Operation

Monday _____ to _____ Friday _____ to _____

Tuesday _____ to _____ Saturday _____ to _____

Wednesday _____ to _____ Sunday _____ to _____

Thursday _____ to _____

SIGNATURE

With this application, I have submitted:

- ☐ Proof of an insurance policy, with minimum limits of one million dollars of general liability coverage
- ☐ A copy of all permits and licenses issued by the county, states, or the city, including but not limited to an ABC permit and business registration
- ☐ A sworn statement describing any violation by the operator of any laws, regulations, or ordinances relating to the possession, sale, consumption, or transportation of intoxicating beverages or controlled substances during the five (5) years immediately proceeding the date of the permit application.
- ☐ A site plan that shows at least five feet of unobstructed space on the sidewalk, placement of tables, chairs, and other furnishings and applicable barriers required for the sale of alcoholic beverages.

Applicant Signature: _____

Date: _____

